Changes to the Nurse Board CRNP Regulations

Significant changes to the Certified Registered Nurse Practitioners (CRNP) regulations went into effect on Dec. 12, 2009. These regulations implemented two changes to the Professional Nursing law. In 2002, the General Assembly passed a bill that gave the State Board of Nursing exclusive jurisdiction over CRNPs. The new CRNP regulations updated the State Board of Nursing’s regulations to remove references to joint regulation of CRNPs by the State Boards of Nursing and Medicine. In 2007 the General Assembly passed a bill that provided specific authorization for CRNPs to perform certain tasks, including ordering home health and hospice care; ordering durable medical equipment; issuing oral orders in health care facilities; making physical therapy, occupational therapy, respiratory therapy and dietitian referrals; performing disability assessments for the program providing Temporary Assistance to Needy Families; issuing home bound schooling certifications; and performing and signing the initial assessment of methadone treatment evaluations.

With the new CRNP regulations published by the Nurse Board, the Medical Board’s regulations concerning the practice of CRNPs have been superseded. However, collaborating physicians are still bound by the State Board of Medicine’s regulations. Physicians are still limited to the number of CRNPs with prescriptive authority they wish to collaborate with up to four at any one time. A physician may apply to the State Board of Medicine for a waiver of the supervision requirements. There is still no limit to the number of CRNPs without prescriptive authority a physician may supervise. Revisions to the Medical Board’s regulations concerning CRNPs are in the regulatory review process.

One of the most significant changes in CRNP prescriptive authority practice is the prescription of controlled substances. CRNPs who have filed a Prescriptive Authority Change Form with the Nurse Board may prescribe Schedule II controlled substances for up to 30 days and Schedule III or IV controlled substances for up to a 90-day supply.

Note that the prescriptive authority collaborative agreement is a separate document from the collaborative agreement that the physician and CRNP sign where they agree to the details of their collaboration. The prescriptive authority application/agreement and change form may be found on the State Board of Nursing’s website at www.dos.state.pa.us/nurse.

The new CRNP regulations can be found by selecting this link, and the physician supervision (collaboration) regulation is available at this link.

Other News:

- **Disciplinary Actions**

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